

12-14-05  
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

**Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
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**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. **MAINTENANCE** correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 11/16/2005

George S. Blasiak  
WALL MARJAMA & BILINSKI  
Suite 400  
101 South Salina Street  
Syracuse, NY 13202

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**  
I hereby certify that this Fee(s) Transmittal is being deposited with the US Postal Service with Sufficient postage as Express Mail in an envelope addressed to Issue Fee on the date indicated below. Express Mail Label No. EV554212885US  
Jeannine C. Schirripa (Depositor's name)  
Jeannine C. Schirripa (Signature)  
December 13, 2005 (Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO.             | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------------------|------------------|
| 09/766,922      | 01/22/2001  | Robert M. Hussey     | 12/15/2003-2885-00000076 500228 | 09766922         |

TITLE OF INVENTION: OPTICAL READER HAVING REDUCED PARAMETER DETERMINATION DELAY

01 FC:1501 1400.00 DA  
02 FC:1504 300.00 DA  
03 FC:8001 30.00 DA

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO           | \$1400    | \$300           | \$1700           | 02/16/2006 |

| EXAMINER         | ART UNIT | CLASS-SUBCLASS |
|------------------|----------|----------------|
| GRANT II, JEROME | 2626     | 358-484000     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  
Wall Marjama & Bilinski LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Hand Held Products, Inc.

Skaneateles Falls, NY

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0289 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature George S. Blasiak

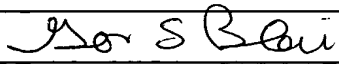
Date December 13, 2005

Typed or printed name George S. Blasiak

Registration No. 37,283

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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|  |   |                          |                  |  |                        |                       |                           |
|--|---|--------------------------|------------------|--|------------------------|-----------------------|---------------------------|
| Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).<br><b>FEE TRANSMITTAL</b><br><b>For FY 2005</b>  |   | <b>Complete if Known</b> |                  |  |                        |                       |                           |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |   | Application Number       | 09/766,922       |  |                        |                       |                           |
| TOTAL AMOUNT OF PAYMENT  |   | Filing Date              | January 22, 2001 |  |                        |                       |                           |
| \$1730.00  |   | First Named Inventor     | Robert M. Hussey |  |                        |                       |                           |
| Express-Mail Label EV554212885US   |   | Examiner Name            | Jerome Grant II  |  |                        |                       |                           |
| <b>METHOD OF PAYMENT (check all that apply)</b>  |   | Art Unit                 | 2626             |  |                        |                       |                           |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____                                 |   | Attorney Docket No.      | 283-280          |  |                        |                       |                           |
| <input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: 50-0289    Deposit Account Name: Wall Marjama & Bilinski LLP  |   |                          |                  |  |                        |                       |                           |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   |   |                          |                  |  |                        |                       |                           |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee  |   |                          |                  |  |                        |                       |                           |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments <input checked="" type="checkbox"/> Credit any overpayments of fee(s) under 37 CFR 1.16 and 1.17   |   |                          |                  |  |                        |                       |                           |
| <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>  |   |                          |                  |  |                        |                       |                           |
| <b>FEE CALCULATION</b>   |   |                          |                  |  |                        |                       |                           |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>   |   |                          |                  |  |                        |                       |                           |
|  | FILING FEES   |                          | SEARCH FEES      |  | EXAMINATION FEES       |                       |                           |
| Application Type   | Fee (\$)  | Small Entity Fee (\$)    | Fee (\$)         | Small Entity Fee (\$)                            | Fee (\$)               | Small Entity Fee (\$) | Fees Paid (\$)            |
| Utility  | 300   | 150                      | 500              | 250  | 200                    | 100                   |                           |
| Design   | 200   | 100                      | 100              | 50   | 130                    | 65                    |                           |
| Plant  | 200   | 100                      | 300              | 150  | 160                    | 80                    |                           |
| Reissue  | 300   | 150                      | 500              | 250  | 600                    | 300                   |                           |
| Provisional  | 200   | 100                      | 0                | 0  | 0                      | 0                     |                           |
| <b>2. EXCESS CLAIM FEES</b>  |   |                          |                  |  |                        |                       | Small Entity              |
| Fee Description  |   |                          |                  |  |                        |                       | Fee (\$)                  |
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent   |   |                          |                  |  |                        |                       | 50                        |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent  |   |                          |                  |  |                        |                       | 200                       |
| Multiple dependent claims  |   |                          |                  |  |                        |                       | 180                       |
| Total Claims   |   | Extra Claims             |                  | Fee (\$)   |                        | Fee Paid (\$)         | Multiple Dependent Claims |
|  | - 20 or HP =  |                          | x                |  | =                      |                       | Fee (\$)                  |
| HP= highest paid number of total claims paid for, if greater than 20   |   |                          |                  |  |                        |                       |                           |
| Indep. Claims  |   | Extra Claims             |                  | Fee (\$)   |                        | Fee Paid (\$)         |                           |
|  | - 3 or HP =   |                          | x                |  | =                      |                       |                           |
| HP = highest number of independent claims paid for, if greater than 3  |   |                          |                  |  |                        |                       |                           |
| <b>3. APPLICATION SIZE FEE</b>   |   |                          |                  |  |                        |                       |                           |
| If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a) (1)(G) and 37 CFR 1.16(s). |   |                          |                  |  |                        |                       |                           |
| Total Sheets   |   | Extra Sheets             |                  | Number of each additional 50 or fraction thereof |                        | Fee (\$)              | Fee Paid (\$)             |
|  | - 100 =   |                          | / 50 =           | (round up to a whole number)                     | x                      | =                     |                           |
| <b>4. OTHER FEES</b>   |   |                          |                  |  |                        |                       | Fees Paid (\$)            |
| Non-English Specification, \$130 fee (no small entity discount)  |   |                          |                  |  |                        |                       |                           |
| Other: Issue Fee \$1400.00 / Publication Fee \$300.00 / 10 Advance Order Copies \$30.00  |   |                          |                  |  |                        |                       | 1730.00                   |
| <b>SUBMITTED BY</b>  |   |                          |                  |  |                        |                       |                           |
| Signature  |  |                          |                  | Registration No. 37,283 (Attorney/Agent)         | Telephone 315-425-9000 |                       |                           |
| Name (Print/Type)  | George S. Blasiak   |                          |                  | Date December 13, 2005                           |                        |                       |                           |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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